

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORKMr Brenda Justice

12CV8613

Amended

(In the space above enter the full name(s) of the plaintiff(s).)

COMPLAINT

-against-

OFFICER HARO 75th Precinct
OFFICER Bloom 75th Precinct
Liz Beal - legal aid 89 CHANDERS,Jury Trial: ☐ Yes ☐ No
(check one)Judge Bayar
Judge Armstrong
who can
witness no warrant was used
was issued -
Richard KORNAPPEL 5th Precinct 19 Elizabeth.

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)

USDC SDNY
DOCUMENT
ELECTRONICALLY FILED
DOC #:
DATE FILED: 1/2/13 @

I. Parties in this complaint:

- A. List your name, address and telephone number. If you are presently in custody, include your identification number and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff Name Brenda Justice
Street Address 733 Miller AV Roommates
County, City NY Brooklyn cell
State & Zip Code NY
Telephone Number 718 369-2519 - cell -
home 718 257 4339 -

- B. List all defendants. You should state the full name of the defendant, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1 Name OFFICER HARO
Street Address 5utton, believe 75th Precinct
Brooklyn

County, City OFFICER Bloom 75th Precinct
 State & Zip Code ny 11207
 Telephone Number 718 827 3511

Defendant No. 2 Name OFFICER Bloom
 Street Address Sutton 75th Precinct
 County, City Brooklyn
 State & Zip Code ny
 Telephone Number 718 827 3511

Defendant No. 3 Name RICHARD KUNNAPPEL
 Street Address 5th Precinct 19 Elizabeth
 County, City _____
 State & Zip Code ny
 Telephone Number _____

Defendant No. 4 Name 1st Precinct
 Street Address not sure
 County, City ny
 State & Zip Code ny
 Telephone Number not sure

II. Basis for Jurisdiction:

Federal courts are courts of limited jurisdiction. Only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case involving the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one state sues a citizen of another state and the amount in damages is more than \$75,000 is a diversity of citizenship case.

A. What is the basis for federal court jurisdiction? (check all that apply)

☒ Federal Questions

☐ Diversity of Citizenship

B. If the basis for jurisdiction is Federal Question, what federal Constitutional, statutory or treaty right is at issue?

son was taken without
a valid warrant out of 733
Miller Av, apt 12 Brooklyn 11207
violation of our 4th amendment -

C. If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party?

Plaintiff(s) state(s) of citizenship to later be discussed

Defendant(s) state(s) of citizenship _____

III. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events.

my son and I were
taken without a valid
warrant oct 15, 2012

from 733 Miller AV
Apt 12
Brooklyn, NY

which violates our 4th
amendment -

my son and I were
taken without
valid warrants.

Brenda Justice

mailing
address - ~~233 11th~~
38-11 Ditmars Blvd
Astoria NY 11105
#656

You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. Where did the events giving rise to your claim(s) occur? 733 miller
AV apt 1R, Brooklyn NY 11207

B. What date and approximate time did the events giving rise to your claim(s) occur? Oct 15, 2012
between 2-3 PM -

C. Facts: I was petrified, I was kidnapped
out of 733 miller AV -

What
happened
to you?

Who did
what?

tall man kidnapped my son and I -
man Had NO valid warrant
our 4th amendment was violated

Was anyone
else
involved?

a tall man who refused to show documentation
or identification, the victims, my son and
el, Richard Kohnepfel son present -

Who else
saw what
happened?

Alexander Moore, my son, Hitler Justice
neighbor who loves pronounced
in our bldg - down the HUNLEER
Hall -

IV. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received.

my son was and is traumatized -
my sons psychological well
Being was affected cause
my son was traumatized
at this Oct 15 2012, nightmare, that we
endured -
I would like my son produced in the
courtroom - here in the bedford courthouse
since this is a bedford case

V. Relief:

State what you want the Court to do for you and the amount of monetary compensation, if any, you are seeking, and the basis for such compensation.

Produce my son
and compensate since our 4th amendment
was violated -

I would like the judge to
determine the compensatory
damage.

Since our 4th amendment
was violated -

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 3 day of Jan, 2012

Signature of Plaintiff

Mailing Address

Telephone Number

Fax Number (if you have one)

Brend - Gusti
3871 Pitmar's Blvd
#656 Astoria, NY
11105
347 813 8885 - 02718
369
2519

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint. Prisoners must also provide their inmate numbers, present place of confinement, and address.

For Prisoners:

I declare under penalty of perjury that on this _____ day of _____, 20____, I am delivering this complaint to prison authorities to be mailed to the *Pro Se* Office of the United States District Court for the Southern District of New York.

Signature of Plaintiff: _____

Inmate Number _____